### CITY OF NAPLES PURCHASING DIVISION CITY HALL, 735 8<sup>TH</sup> STREET SOUTH NAPLES, FLORIDA 34102 PH: 239-213-7100 FX: 239-213-7105

## ADDENDUM NUMBER 1

NOTIFICATION DATE:	SOLICITATION TITLE:	SOLICITATION NUMBER:	BID OPENING DATE & TIME:
3/14/2022	CDBG River Park Street Lighting Project - ITB	22-017	3/31/2022 2:00PM

## THE FOLLOWING INFORMATION IS HEREBY INCORPORATED INTO, AND MADE AN OFFICIAL PART OF THE ABOVE REFERENCED BID.

The following clarification is issued as an addendum identifying the following changes for the referenced solicitation.

1. REVISED SCHEDULE OF VALUES FORM:

Attached Exhibit A is a REVISED SCHEDULE OF VALUES FORM. The Form replaced in its entirety the originally publish Schedule of Values Form.

THE REVISED SCHEDULE OF VALUES FORM (EXHIBIT A) MUST BE USED BY BIDDERS OR THE BID WILL BE REJECTED.

2. Please find attached Exhibit B - LIGHT POLE & BANNER DETAIL

## Exhibit A - REVISED SCHEDULE OF VALUES Exhibit B - LIGHT POLE & BANNER DETAIL

###

**IMPORTANT MESSAGE** 

PLEASE ACKNOWLEDGE RECEIPT OF THIS ADDENDUM ON THE BID COVER SHEET.

### **Exhibit A - REVISED SCHEDULE OF VALUES**

# SCHEDULE OF VALUES ITB 22-017 River Park Street Lighting Project

ltem No.	Description	Brand	Unit	QTY	Unit Price	Amount
1 1	Purchase and Installation of Street Light Fixtures		EA	155	\$	\$
2	Banner Arms		EA	8	\$	\$

NOTE 1:

ALL ITEMS QUOTED MUST BE IN COMPLIANCE WITH THE SPECIFICATIONS IN THE BID NOTE 2:

FAILURE TO SUBMIT ALL REQUIRED ITEM SPECIFICATIONS AND IN THE REQUIRED FORMAT WILL RESULT IN THE BIDDER BEING DEEMED NON-RESPONSIVE AND AUTOMATIC REJECTION OF BID.

This solicitation has potential for P-Card Payment. Does your company accept credit card payment? YES\_\_\_\_ NO\_\_\_\_

If "yes" please indicate payment options on the below chart.

Payment Options	YES	NO	PERCENT AND/OR TERMS FOR EARLY PAYMENT
Is there a discount for a credit card payment?			
Is there an additional charge for credit card payment?			
Discount for early payment?			
Prompt payment terms:%Days; Net 30 Days			

Company Name:\_\_\_\_\_

EIN:\_\_\_\_\_

Email: \_\_\_\_\_

Name and Title of individual completing this schedule:

(Printed Name)

(Title)

X\_\_\_\_\_

(Signature)

#### **Exhibit B - LIGHT POLE & BANNER DETAIL**

